

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

| <b>PATENT APPLICATION FEE DETERMINATION RECORD</b><br>Substitute for Form PTO-875  |   |   |                            | Application or Docket Number<br><b>10/598,285</b> | Filing Date<br><b>06/21/2007</b> | <input type="checkbox"/> To be Mailed |                               |                        |           |                            |            |                            |  |            |   |   |                  |              |                        |              |                        |                        |              |           |          |                        |                        |   |           |                        |     |                              |           |           |  |  |        |        |    |          |        |   |  |     |        |  |  |           |                                  |            |    |        |  |  |  |  |           |                       |        |                       |        |                       |   |   |  |       |  |       |  |  |            |  |  |            |            |                            |  |           |   |   |                  |           |                        |           |                        |   |       |    |   |                        |                        |                              |   |       |     |   |           |           |  |  |  |        |  |    |        |  |  |  |  |  |  |  |        |  |    |        |  |  |  |  |  |  |  |                       |    |                       |     |  |  |  |  |
|--|---|---|----------------------------|---|----------------------------------|---------------------------------------|-------------------------------|------------------------|-----------|----------------------------|------------|----------------------------|--|------------|---|---|------------------|--------------|------------------------|--------------|------------------------|------------------------|--------------|-----------|----------|------------------------|------------------------|---|-----------|------------------------|-----|------------------------------|-----------|-----------|--|--|--------|--------|----|----------|--------|---|--|-----|--------|--|--|-----------|----------------------------------|------------|----|--------|--|--|--|--|-----------|-----------------------|--------|-----------------------|--------|-----------------------|---|---|--|-------|--|-------|--|--|------------|--|--|------------|------------|----------------------------|--|-----------|---|---|------------------|-----------|------------------------|-----------|------------------------|---|-------|----|---|------------------------|------------------------|------------------------------|---|-------|-----|---|-----------|-----------|--|--|--|--------|--|----|--------|--|--|--|--|--|--|--|--------|--|----|--------|--|--|--|--|--|--|--|-----------------------|----|-----------------------|-----|--|--|--|--|
| <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="3" style="text-align: left; padding-bottom: 5px;">APPLICATION AS FILED – PART I</th> <th colspan="4" style="text-align: right; padding-bottom: 5px;">OTHER THAN<br/>SMALL ENTITY</th> </tr> <tr> <th style="text-align: center; padding-bottom: 5px;">(Column 1)</th> <th style="text-align: center; padding-bottom: 5px;">(Column 2)</th> <th style="text-align: center; padding-bottom: 5px;">SMALL ENTITY <input type="checkbox"/></th> <th colspan="3" style="text-align: right; padding-bottom: 5px;">OR</th> <th style="text-align: center; padding-bottom: 5px;">SMALL ENTITY</th> </tr> </thead> <tbody> <tr> <td style="padding: 5px;">FOR</td> <td style="padding: 5px;">NUMBER FILED</td> <td style="padding: 5px;">NUMBER EXTRA</td> <td style="padding: 5px;">RATE (\$)</td> <td style="padding: 5px;">FEE (\$)</td> <td style="padding: 5px;">RATE (\$)</td> <td style="padding: 5px;">FEE (\$)</td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> BASIC FEE<br/>(37 CFR 1.16(a), (b), or (c))</td> <td style="padding: 5px;">N/A</td> <td style="padding: 5px;">N/A</td> <td style="padding: 5px;">N/A</td> <td style="padding: 5px;"></td> <td style="padding: 5px;">N/A</td> <td style="padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> SEARCH FEE<br/>(37 CFR 1.16(k), (l), or (m))</td> <td style="padding: 5px;">N/A</td> <td style="padding: 5px;">N/A</td> <td style="padding: 5px;">N/A</td> <td style="padding: 5px;"></td> <td style="padding: 5px;">N/A</td> <td style="padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> EXAMINATION FEE<br/>(37 CFR 1.16(o), (p), or (q))</td> <td style="padding: 5px;">N/A</td> <td style="padding: 5px;">N/A</td> <td style="padding: 5px;">N/A</td> <td style="padding: 5px;"></td> <td style="padding: 5px;">N/A</td> <td style="padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;">TOTAL CLAIMS<br/>(37 CFR 1.16(i))</td> <td style="padding: 5px;">minus 20 =</td> <td style="padding: 5px;">*</td> <td style="padding: 5px;">X \$ =</td> <td style="padding: 5px;"></td> <td style="padding: 5px;">X \$ =</td> <td style="padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;">INDEPENDENT CLAIMS<br/>(37 CFR 1.16(h))</td> <td style="padding: 5px;">minus 3 =</td> <td style="padding: 5px;">*</td> <td style="padding: 5px;">X \$ =</td> <td style="padding: 5px;"></td> <td style="padding: 5px;">X \$ =</td> <td style="padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> APPLICATION SIZE FEE<br/>(37 CFR 1.16(s))</td> <td colspan="2" style="padding: 5px;">If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).</td> <td style="padding: 5px;">TOTAL</td> <td style="padding: 5px;"></td> <td style="padding: 5px;">TOTAL</td> <td style="padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))</td> <td colspan="2" style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> </tr> </tbody> </table> <p style="margin-left: 20px;">* If the difference in column 1 is less than zero, enter "0" in column 2.</p>  |   |   |                            |   |                                  |                                       | APPLICATION AS FILED – PART I |                        |           | OTHER THAN<br>SMALL ENTITY |            |                            |  | (Column 1) | (Column 2)                                | SMALL ENTITY <input type="checkbox"/>       | OR               |              |                        | SMALL ENTITY | FOR                    | NUMBER FILED           | NUMBER EXTRA | RATE (\$) | FEE (\$) | RATE (\$)              | FEE (\$)               | <input type="checkbox"/> BASIC FEE<br>(37 CFR 1.16(a), (b), or (c)) | N/A       | N/A                    | N/A |                              | N/A       |           | <input type="checkbox"/> SEARCH FEE<br>(37 CFR 1.16(k), (l), or (m)) | N/A  | N/A    | N/A    |    | N/A      |        | <input type="checkbox"/> EXAMINATION FEE<br>(37 CFR 1.16(o), (p), or (q)) | N/A  | N/A | N/A    |  | N/A  |           | TOTAL CLAIMS<br>(37 CFR 1.16(i)) | minus 20 = | *  | X \$ = |  | X \$ =   |  | INDEPENDENT CLAIMS<br>(37 CFR 1.16(h)) | minus 3 = | *                     | X \$ = |                       | X \$ = |                       | <input type="checkbox"/> APPLICATION SIZE FEE<br>(37 CFR 1.16(s)) | If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).   |  | TOTAL |  | TOTAL |  | <input type="checkbox"/> MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j)) |            |  |  |            |            |                            |  |           |   |   |                  |           |                        |           |                        |   |       |    |   |                        |                        |                              |   |       |     |   |           |           |  |  |  |        |  |    |        |  |  |  |  |  |  |  |        |  |    |        |  |  |  |  |  |  |  |                       |    |                       |     |  |  |  |  |
| APPLICATION AS FILED – PART I  |   |   | OTHER THAN<br>SMALL ENTITY |   |                                  |                                       |                               |                        |           |                            |            |                            |  |            |   |   |                  |              |                        |              |                        |                        |              |           |          |                        |                        |   |           |                        |     |                              |           |           |  |  |        |        |    |          |        |   |  |     |        |  |  |           |                                  |            |    |        |  |  |  |  |           |                       |        |                       |        |                       |   |   |  |       |  |       |  |  |            |  |  |            |            |                            |  |           |   |   |                  |           |                        |           |                        |   |       |    |   |                        |                        |                              |   |       |     |   |           |           |  |  |  |        |  |    |        |  |  |  |  |  |  |  |        |  |    |        |  |  |  |  |  |  |  |                       |    |                       |     |  |  |  |  |
| (Column 1)   | (Column 2)  | SMALL ENTITY <input type="checkbox"/>       | OR                         |   |                                  | SMALL ENTITY                          |                               |                        |           |                            |            |                            |  |            |   |   |                  |              |                        |              |                        |                        |              |           |          |                        |                        |   |           |                        |     |                              |           |           |  |  |        |        |    |          |        |   |  |     |        |  |  |           |                                  |            |    |        |  |  |  |  |           |                       |        |                       |        |                       |   |   |  |       |  |       |  |  |            |  |  |            |            |                            |  |           |   |   |                  |           |                        |           |                        |   |       |    |   |                        |                        |                              |   |       |     |   |           |           |  |  |  |        |  |    |        |  |  |  |  |  |  |  |        |  |    |        |  |  |  |  |  |  |  |                       |    |                       |     |  |  |  |  |
| FOR  | NUMBER FILED  | NUMBER EXTRA                                | RATE (\$)                  | FEE (\$)  | RATE (\$)                        | FEE (\$)                              |                               |                        |           |                            |            |                            |  |            |   |   |                  |              |                        |              |                        |                        |              |           |          |                        |                        |   |           |                        |     |                              |           |           |  |  |        |        |    |          |        |   |  |     |        |  |  |           |                                  |            |    |        |  |  |  |  |           |                       |        |                       |        |                       |   |   |  |       |  |       |  |  |            |  |  |            |            |                            |  |           |   |   |                  |           |                        |           |                        |   |       |    |   |                        |                        |                              |   |       |     |   |           |           |  |  |  |        |  |    |        |  |  |  |  |  |  |  |        |  |    |        |  |  |  |  |  |  |  |                       |    |                       |     |  |  |  |  |
| <input type="checkbox"/> BASIC FEE<br>(37 CFR 1.16(a), (b), or (c))  | N/A   | N/A   | N/A                        |   | N/A                              |                                       |                               |                        |           |                            |            |                            |  |            |   |   |                  |              |                        |              |                        |                        |              |           |          |                        |                        |   |           |                        |     |                              |           |           |  |  |        |        |    |          |        |   |  |     |        |  |  |           |                                  |            |    |        |  |  |  |  |           |                       |        |                       |        |                       |   |   |  |       |  |       |  |  |            |  |  |            |            |                            |  |           |   |   |                  |           |                        |           |                        |   |       |    |   |                        |                        |                              |   |       |     |   |           |           |  |  |  |        |  |    |        |  |  |  |  |  |  |  |        |  |    |        |  |  |  |  |  |  |  |                       |    |                       |     |  |  |  |  |
| <input type="checkbox"/> SEARCH FEE<br>(37 CFR 1.16(k), (l), or (m))   | N/A   | N/A   | N/A                        |   | N/A                              |                                       |                               |                        |           |                            |            |                            |  |            |   |   |                  |              |                        |              |                        |                        |              |           |          |                        |                        |   |           |                        |     |                              |           |           |  |  |        |        |    |          |        |   |  |     |        |  |  |           |                                  |            |    |        |  |  |  |  |           |                       |        |                       |        |                       |   |   |  |       |  |       |  |  |            |  |  |            |            |                            |  |           |   |   |                  |           |                        |           |                        |   |       |    |   |                        |                        |                              |   |       |     |   |           |           |  |  |  |        |  |    |        |  |  |  |  |  |  |  |        |  |    |        |  |  |  |  |  |  |  |                       |    |                       |     |  |  |  |  |
| <input type="checkbox"/> EXAMINATION FEE<br>(37 CFR 1.16(o), (p), or (q))  | N/A   | N/A   | N/A                        |   | N/A                              |                                       |                               |                        |           |                            |            |                            |  |            |   |   |                  |              |                        |              |                        |                        |              |           |          |                        |                        |   |           |                        |     |                              |           |           |  |  |        |        |    |          |        |   |  |     |        |  |  |           |                                  |            |    |        |  |  |  |  |           |                       |        |                       |        |                       |   |   |  |       |  |       |  |  |            |  |  |            |            |                            |  |           |   |   |                  |           |                        |           |                        |   |       |    |   |                        |                        |                              |   |       |     |   |           |           |  |  |  |        |  |    |        |  |  |  |  |  |  |  |        |  |    |        |  |  |  |  |  |  |  |                       |    |                       |     |  |  |  |  |
| TOTAL CLAIMS<br>(37 CFR 1.16(i))   | minus 20 =  | *   | X \$ =                     |   | X \$ =                           |                                       |                               |                        |           |                            |            |                            |  |            |   |   |                  |              |                        |              |                        |                        |              |           |          |                        |                        |   |           |                        |     |                              |           |           |  |  |        |        |    |          |        |   |  |     |        |  |  |           |                                  |            |    |        |  |  |  |  |           |                       |        |                       |        |                       |   |   |  |       |  |       |  |  |            |  |  |            |            |                            |  |           |   |   |                  |           |                        |           |                        |   |       |    |   |                        |                        |                              |   |       |     |   |           |           |  |  |  |        |  |    |        |  |  |  |  |  |  |  |        |  |    |        |  |  |  |  |  |  |  |                       |    |                       |     |  |  |  |  |
| INDEPENDENT CLAIMS<br>(37 CFR 1.16(h))   | minus 3 =   | *   | X \$ =                     |   | X \$ =                           |                                       |                               |                        |           |                            |            |                            |  |            |   |   |                  |              |                        |              |                        |                        |              |           |          |                        |                        |   |           |                        |     |                              |           |           |  |  |        |        |    |          |        |   |  |     |        |  |  |           |                                  |            |    |        |  |  |  |  |           |                       |        |                       |        |                       |   |   |  |       |  |       |  |  |            |  |  |            |            |                            |  |           |   |   |                  |           |                        |           |                        |   |       |    |   |                        |                        |                              |   |       |     |   |           |           |  |  |  |        |  |    |        |  |  |  |  |  |  |  |        |  |    |        |  |  |  |  |  |  |  |                       |    |                       |     |  |  |  |  |
| <input type="checkbox"/> APPLICATION SIZE FEE<br>(37 CFR 1.16(s))  | If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). |   | TOTAL                      |   | TOTAL                            |                                       |                               |                        |           |                            |            |                            |  |            |   |   |                  |              |                        |              |                        |                        |              |           |          |                        |                        |   |           |                        |     |                              |           |           |  |  |        |        |    |          |        |   |  |     |        |  |  |           |                                  |            |    |        |  |  |  |  |           |                       |        |                       |        |                       |   |   |  |       |  |       |  |  |            |  |  |            |            |                            |  |           |   |   |                  |           |                        |           |                        |   |       |    |   |                        |                        |                              |   |       |     |   |           |           |  |  |  |        |  |    |        |  |  |  |  |  |  |  |        |  |    |        |  |  |  |  |  |  |  |                       |    |                       |     |  |  |  |  |
| <input type="checkbox"/> MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))   |   |   |                            |   |                                  |                                       |                               |                        |           |                            |            |                            |  |            |   |   |                  |              |                        |              |                        |                        |              |           |          |                        |                        |   |           |                        |     |                              |           |           |  |  |        |        |    |          |        |   |  |     |        |  |  |           |                                  |            |    |        |  |  |  |  |           |                       |        |                       |        |                       |   |   |  |       |  |       |  |  |            |  |  |            |            |                            |  |           |   |   |                  |           |                        |           |                        |   |       |    |   |                        |                        |                              |   |       |     |   |           |           |  |  |  |        |  |    |        |  |  |  |  |  |  |  |        |  |    |        |  |  |  |  |  |  |  |                       |    |                       |     |  |  |  |  |
| <b>APPLICATION AS AMENDED – PART II</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="3" style="text-align: left; padding-bottom: 5px;">(Column 1)</th> <th style="text-align: center; padding-bottom: 5px;">(Column 2)</th> <th style="text-align: center; padding-bottom: 5px;">(Column 3)</th> <th colspan="2" style="text-align: right; padding-bottom: 5px;">OTHER THAN<br/>SMALL ENTITY</th> </tr> <tr> <th rowspan="2" style="text-align: center; vertical-align: bottom;">AMENDMENT</th> <th style="text-align: center; vertical-align: bottom;">CLAIMS<br/>REMAINING<br/>AFTER<br/>AMENDMENT</th> <th style="text-align: center; vertical-align: bottom;">HIGHEST<br/>NUMBER<br/>PREVIOUSLY<br/>PAID FOR</th> <th style="text-align: center; vertical-align: bottom;">PRESENT<br/>EXTRA</th> <th style="text-align: center; vertical-align: bottom;">SMALL ENTITY</th> <th style="text-align: center; vertical-align: bottom;">OR</th> <th style="text-align: center; vertical-align: bottom;">SMALL ENTITY</th> </tr> </thead> <tbody> <tr> <td style="padding: 5px;">03/19/2009</td> <td style="padding: 5px;">Total (37 CFR 1.16(i))</td> <td style="padding: 5px;">* 25</td> <td style="padding: 5px;">Minus</td> <td style="padding: 5px;">** 20</td> <td style="padding: 5px;">= 5</td> <td style="padding: 5px;">RATE (\$)</td> <td style="padding: 5px;">ADDITIONAL<br/>FEE (\$)</td> <td style="padding: 5px;">RATE (\$)</td> <td style="padding: 5px;">ADDITIONAL<br/>FEE (\$)</td> </tr> <tr> <td style="padding: 5px;"></td> <td style="padding: 5px;">Independent (37 CFR 1.16(h))</td> <td style="padding: 5px;">* 4</td> <td style="padding: 5px;">Minus</td> <td style="padding: 5px;">***4</td> <td style="padding: 5px;">= 0</td> <td style="padding: 5px;">X \$ =</td> <td style="padding: 5px;"></td> <td style="padding: 5px;">OR</td> <td style="padding: 5px;">X \$ 52=</td> <td style="padding: 5px;">260</td> </tr> <tr> <td style="padding: 5px;"></td> <td colspan="2" style="padding: 5px;"><input type="checkbox"/> Application Size Fee (37 CFR 1.16(s))</td> <td style="padding: 5px;">X \$ =</td> <td style="padding: 5px;"></td> <td style="padding: 5px;">OR</td> <td style="padding: 5px;">X \$ 220=</td> <td style="padding: 5px;">0</td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;"></td> <td colspan="2" style="padding: 5px;"><input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))</td> <td style="padding: 5px;">TOTAL<br/>ADD'L<br/>FEE</td> <td style="padding: 5px;">OR</td> <td style="padding: 5px;">TOTAL<br/>ADD'L<br/>FEE</td> <td style="padding: 5px;">260</td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> </tr> <tr> <td colspan="7" style="padding: 10px; text-align: center;"> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="3" style="text-align: left; padding-bottom: 5px;">(Column 1)</th> <th style="text-align: center; padding-bottom: 5px;">(Column 2)</th> <th style="text-align: center; padding-bottom: 5px;">(Column 3)</th> <th colspan="2" style="text-align: right; padding-bottom: 5px;">OTHER THAN<br/>SMALL ENTITY</th> </tr> <tr> <th rowspan="2" style="text-align: center; vertical-align: bottom;">AMENDMENT</th> <th style="text-align: center; vertical-align: bottom;">CLAIMS<br/>REMAINING<br/>AFTER<br/>AMENDMENT</th> <th style="text-align: center; vertical-align: bottom;">HIGHEST<br/>NUMBER<br/>PREVIOUSLY<br/>PAID FOR</th> <th style="text-align: center; vertical-align: bottom;">PRESENT<br/>EXTRA</th> <th style="text-align: center; vertical-align: bottom;">RATE (\$)</th> <th style="text-align: center; vertical-align: bottom;">ADDITIONAL<br/>FEE (\$)</th> <th style="text-align: center; vertical-align: bottom;">RATE (\$)</th> </tr> </thead> <tbody> <tr> <td style="padding: 5px;">Total (37 CFR 1.16(i))</td> <td style="padding: 5px;">* </td> <td style="padding: 5px;">Minus</td> <td style="padding: 5px;">** </td> <td style="padding: 5px;">= </td> <td style="padding: 5px;">ADDITIONAL<br/>FEE (\$)</td> <td style="padding: 5px;">ADDITIONAL<br/>FEE (\$)</td> </tr> <tr> <td style="padding: 5px;">Independent (37 CFR 1.16(h))</td> <td style="padding: 5px;">* </td> <td style="padding: 5px;">Minus</td> <td style="padding: 5px;">*** </td> <td style="padding: 5px;">= </td> <td style="padding: 5px;">RATE (\$)</td> <td style="padding: 5px;">RATE (\$)</td> </tr> <tr> <td style="padding: 5px;"></td> <td colspan="2" style="padding: 5px;"><input type="checkbox"/> Application Size Fee (37 CFR 1.16(s))</td> <td style="padding: 5px;">X \$ =</td> <td style="padding: 5px;"></td> <td style="padding: 5px;">OR</td> <td style="padding: 5px;">X \$ =</td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;"></td> <td colspan="2" style="padding: 5px;"><input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))</td> <td style="padding: 5px;">X \$ =</td> <td style="padding: 5px;"></td> <td style="padding: 5px;">OR</td> <td style="padding: 5px;">X \$ =</td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;"></td> <td colspan="2" style="padding: 5px;"></td> <td style="padding: 5px;">TOTAL<br/>ADD'L<br/>FEE</td> <td style="padding: 5px;">OR</td> <td style="padding: 5px;">TOTAL<br/>ADD'L<br/>FEE</td> <td style="padding: 5px;">260</td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> </tr> </tbody> </table> </td> </tr> </tbody> </table> |   |   |                            |   |                                  |                                       | (Column 1)                    |                        |           | (Column 2)                 | (Column 3) | OTHER THAN<br>SMALL ENTITY |  | AMENDMENT  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA | SMALL ENTITY | OR                     | SMALL ENTITY | 03/19/2009             | Total (37 CFR 1.16(i)) | * 25         | Minus     | ** 20    | = 5                    | RATE (\$)              | ADDITIONAL<br>FEE (\$)  | RATE (\$) | ADDITIONAL<br>FEE (\$) |     | Independent (37 CFR 1.16(h)) | * 4       | Minus     | ***4   | = 0  | X \$ = |        | OR | X \$ 52= | 260    |   | <input type="checkbox"/> Application Size Fee (37 CFR 1.16(s)) |     | X \$ = |  | OR   | X \$ 220= | 0                                |            |    |        |  | <input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) |  | TOTAL<br>ADD'L<br>FEE                  | OR        | TOTAL<br>ADD'L<br>FEE | 260    |                       |        |                       |   | <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="3" style="text-align: left; padding-bottom: 5px;">(Column 1)</th> <th style="text-align: center; padding-bottom: 5px;">(Column 2)</th> <th style="text-align: center; padding-bottom: 5px;">(Column 3)</th> <th colspan="2" style="text-align: right; padding-bottom: 5px;">OTHER THAN<br/>SMALL ENTITY</th> </tr> <tr> <th rowspan="2" style="text-align: center; vertical-align: bottom;">AMENDMENT</th> <th style="text-align: center; vertical-align: bottom;">CLAIMS<br/>REMAINING<br/>AFTER<br/>AMENDMENT</th> <th style="text-align: center; vertical-align: bottom;">HIGHEST<br/>NUMBER<br/>PREVIOUSLY<br/>PAID FOR</th> <th style="text-align: center; vertical-align: bottom;">PRESENT<br/>EXTRA</th> <th style="text-align: center; vertical-align: bottom;">RATE (\$)</th> <th style="text-align: center; vertical-align: bottom;">ADDITIONAL<br/>FEE (\$)</th> <th style="text-align: center; vertical-align: bottom;">RATE (\$)</th> </tr> </thead> <tbody> <tr> <td style="padding: 5px;">Total (37 CFR 1.16(i))</td> <td style="padding: 5px;">* </td> <td style="padding: 5px;">Minus</td> <td style="padding: 5px;">** </td> <td style="padding: 5px;">= </td> <td style="padding: 5px;">ADDITIONAL<br/>FEE (\$)</td> <td style="padding: 5px;">ADDITIONAL<br/>FEE (\$)</td> </tr> <tr> <td style="padding: 5px;">Independent (37 CFR 1.16(h))</td> <td style="padding: 5px;">* </td> <td style="padding: 5px;">Minus</td> <td style="padding: 5px;">*** </td> <td style="padding: 5px;">= </td> <td style="padding: 5px;">RATE (\$)</td> <td style="padding: 5px;">RATE (\$)</td> </tr> <tr> <td style="padding: 5px;"></td> <td colspan="2" style="padding: 5px;"><input type="checkbox"/> Application Size Fee (37 CFR 1.16(s))</td> <td style="padding: 5px;">X \$ =</td> <td style="padding: 5px;"></td> <td style="padding: 5px;">OR</td> <td style="padding: 5px;">X \$ =</td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;"></td> <td colspan="2" style="padding: 5px;"><input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))</td> <td style="padding: 5px;">X \$ =</td> <td style="padding: 5px;"></td> <td style="padding: 5px;">OR</td> <td style="padding: 5px;">X \$ =</td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;"></td> <td colspan="2" style="padding: 5px;"></td> <td style="padding: 5px;">TOTAL<br/>ADD'L<br/>FEE</td> <td style="padding: 5px;">OR</td> <td style="padding: 5px;">TOTAL<br/>ADD'L<br/>FEE</td> <td style="padding: 5px;">260</td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> </tr> </tbody> </table> |  |       |  |       |  |  | (Column 1) |  |  | (Column 2) | (Column 3) | OTHER THAN<br>SMALL ENTITY |  | AMENDMENT | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA | RATE (\$) | ADDITIONAL<br>FEE (\$) | RATE (\$) | Total (37 CFR 1.16(i)) | * | Minus | ** | = | ADDITIONAL<br>FEE (\$) | ADDITIONAL<br>FEE (\$) | Independent (37 CFR 1.16(h)) | * | Minus | *** | = | RATE (\$) | RATE (\$) |  | <input type="checkbox"/> Application Size Fee (37 CFR 1.16(s)) |  | X \$ = |  | OR | X \$ = |  |  |  |  |  | <input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) |  | X \$ = |  | OR | X \$ = |  |  |  |  |  |  |  | TOTAL<br>ADD'L<br>FEE | OR | TOTAL<br>ADD'L<br>FEE | 260 |  |  |  |  |
| (Column 1)   |   |   | (Column 2)                 | (Column 3)  | OTHER THAN<br>SMALL ENTITY       |                                       |                               |                        |           |                            |            |                            |  |            |   |   |                  |              |                        |              |                        |                        |              |           |          |                        |                        |   |           |                        |     |                              |           |           |  |  |        |        |    |          |        |   |  |     |        |  |  |           |                                  |            |    |        |  |  |  |  |           |                       |        |                       |        |                       |   |   |  |       |  |       |  |  |            |  |  |            |            |                            |  |           |   |   |                  |           |                        |           |                        |   |       |    |   |                        |                        |                              |   |       |     |   |           |           |  |  |  |        |  |    |        |  |  |  |  |  |  |  |        |  |    |        |  |  |  |  |  |  |  |                       |    |                       |     |  |  |  |  |
| AMENDMENT  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA           | SMALL ENTITY                                      | OR                               | SMALL ENTITY                          |                               |                        |           |                            |            |                            |  |            |   |   |                  |              |                        |              |                        |                        |              |           |          |                        |                        |   |           |                        |     |                              |           |           |  |  |        |        |    |          |        |   |  |     |        |  |  |           |                                  |            |    |        |  |  |  |  |           |                       |        |                       |        |                       |   |   |  |       |  |       |  |  |            |  |  |            |            |                            |  |           |   |   |                  |           |                        |           |                        |   |       |    |   |                        |                        |                              |   |       |     |   |           |           |  |  |  |        |  |    |        |  |  |  |  |  |  |  |        |  |    |        |  |  |  |  |  |  |  |                       |    |                       |     |  |  |  |  |
|  | 03/19/2009  | Total (37 CFR 1.16(i))                      | * 25                       | Minus   | ** 20                            | = 5                                   | RATE (\$)                     | ADDITIONAL<br>FEE (\$) | RATE (\$) | ADDITIONAL<br>FEE (\$)     |            |                            |  |            |   |   |                  |              |                        |              |                        |                        |              |           |          |                        |                        |   |           |                        |     |                              |           |           |  |  |        |        |    |          |        |   |  |     |        |  |  |           |                                  |            |    |        |  |  |  |  |           |                       |        |                       |        |                       |   |   |  |       |  |       |  |  |            |  |  |            |            |                            |  |           |   |   |                  |           |                        |           |                        |   |       |    |   |                        |                        |                              |   |       |     |   |           |           |  |  |  |        |  |    |        |  |  |  |  |  |  |  |        |  |    |        |  |  |  |  |  |  |  |                       |    |                       |     |  |  |  |  |
|  | Independent (37 CFR 1.16(h))  | * 4   | Minus                      | ***4  | = 0                              | X \$ =                                |                               | OR                     | X \$ 52=  | 260                        |            |                            |  |            |   |   |                  |              |                        |              |                        |                        |              |           |          |                        |                        |   |           |                        |     |                              |           |           |  |  |        |        |    |          |        |   |  |     |        |  |  |           |                                  |            |    |        |  |  |  |  |           |                       |        |                       |        |                       |   |   |  |       |  |       |  |  |            |  |  |            |            |                            |  |           |   |   |                  |           |                        |           |                        |   |       |    |   |                        |                        |                              |   |       |     |   |           |           |  |  |  |        |  |    |        |  |  |  |  |  |  |  |        |  |    |        |  |  |  |  |  |  |  |                       |    |                       |     |  |  |  |  |
|  | <input type="checkbox"/> Application Size Fee (37 CFR 1.16(s))  |   | X \$ =                     |   | OR                               | X \$ 220=                             | 0                             |                        |           |                            |            |                            |  |            |   |   |                  |              |                        |              |                        |                        |              |           |          |                        |                        |   |           |                        |     |                              |           |           |  |  |        |        |    |          |        |   |  |     |        |  |  |           |                                  |            |    |        |  |  |  |  |           |                       |        |                       |        |                       |   |   |  |       |  |       |  |  |            |  |  |            |            |                            |  |           |   |   |                  |           |                        |           |                        |   |       |    |   |                        |                        |                              |   |       |     |   |           |           |  |  |  |        |  |    |        |  |  |  |  |  |  |  |        |  |    |        |  |  |  |  |  |  |  |                       |    |                       |     |  |  |  |  |
|  | <input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))  |   | TOTAL<br>ADD'L<br>FEE      | OR  | TOTAL<br>ADD'L<br>FEE            | 260                                   |                               |                        |           |                            |            |                            |  |            |   |   |                  |              |                        |              |                        |                        |              |           |          |                        |                        |   |           |                        |     |                              |           |           |  |  |        |        |    |          |        |   |  |     |        |  |  |           |                                  |            |    |        |  |  |  |  |           |                       |        |                       |        |                       |   |   |  |       |  |       |  |  |            |  |  |            |            |                            |  |           |   |   |                  |           |                        |           |                        |   |       |    |   |                        |                        |                              |   |       |     |   |           |           |  |  |  |        |  |    |        |  |  |  |  |  |  |  |        |  |    |        |  |  |  |  |  |  |  |                       |    |                       |     |  |  |  |  |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="3" style="text-align: left; padding-bottom: 5px;">(Column 1)</th> <th style="text-align: center; padding-bottom: 5px;">(Column 2)</th> <th style="text-align: center; padding-bottom: 5px;">(Column 3)</th> <th colspan="2" style="text-align: right; padding-bottom: 5px;">OTHER THAN<br/>SMALL ENTITY</th> </tr> <tr> <th rowspan="2" style="text-align: center; vertical-align: bottom;">AMENDMENT</th> <th style="text-align: center; vertical-align: bottom;">CLAIMS<br/>REMAINING<br/>AFTER<br/>AMENDMENT</th> <th style="text-align: center; vertical-align: bottom;">HIGHEST<br/>NUMBER<br/>PREVIOUSLY<br/>PAID FOR</th> <th style="text-align: center; vertical-align: bottom;">PRESENT<br/>EXTRA</th> <th style="text-align: center; vertical-align: bottom;">RATE (\$)</th> <th style="text-align: center; vertical-align: bottom;">ADDITIONAL<br/>FEE (\$)</th> <th style="text-align: center; vertical-align: bottom;">RATE (\$)</th> </tr> </thead> <tbody> <tr> <td style="padding: 5px;">Total (37 CFR 1.16(i))</td> <td style="padding: 5px;">* </td> <td style="padding: 5px;">Minus</td> <td style="padding: 5px;">** </td> <td style="padding: 5px;">= </td> <td style="padding: 5px;">ADDITIONAL<br/>FEE (\$)</td> <td style="padding: 5px;">ADDITIONAL<br/>FEE (\$)</td> </tr> <tr> <td style="padding: 5px;">Independent (37 CFR 1.16(h))</td> <td style="padding: 5px;">* </td> <td style="padding: 5px;">Minus</td> <td style="padding: 5px;">*** </td> <td style="padding: 5px;">= </td> <td style="padding: 5px;">RATE (\$)</td> <td style="padding: 5px;">RATE (\$)</td> </tr> <tr> <td style="padding: 5px;"></td> <td colspan="2" style="padding: 5px;"><input type="checkbox"/> Application Size Fee (37 CFR 1.16(s))</td> <td style="padding: 5px;">X \$ =</td> <td style="padding: 5px;"></td> <td style="padding: 5px;">OR</td> <td style="padding: 5px;">X \$ =</td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;"></td> <td colspan="2" style="padding: 5px;"><input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))</td> <td style="padding: 5px;">X \$ =</td> <td style="padding: 5px;"></td> <td style="padding: 5px;">OR</td> <td style="padding: 5px;">X \$ =</td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;"></td> <td colspan="2" style="padding: 5px;"></td> <td style="padding: 5px;">TOTAL<br/>ADD'L<br/>FEE</td> <td style="padding: 5px;">OR</td> <td style="padding: 5px;">TOTAL<br/>ADD'L<br/>FEE</td> <td style="padding: 5px;">260</td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> </tr> </tbody> </table>  |   |   |                            |   |                                  |                                       | (Column 1)                    |                        |           | (Column 2)                 | (Column 3) | OTHER THAN<br>SMALL ENTITY |  | AMENDMENT  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA | RATE (\$)    | ADDITIONAL<br>FEE (\$) | RATE (\$)    | Total (37 CFR 1.16(i)) | *                      | Minus        | **        | =        | ADDITIONAL<br>FEE (\$) | ADDITIONAL<br>FEE (\$) | Independent (37 CFR 1.16(h))  | *         | Minus                  | *** | =                            | RATE (\$) | RATE (\$) |  | <input type="checkbox"/> Application Size Fee (37 CFR 1.16(s)) |        | X \$ = |    | OR       | X \$ = |   |  |     |        |  | <input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) |           | X \$ =                           |            | OR | X \$ = |  |  |  |  |           |                       |        | TOTAL<br>ADD'L<br>FEE | OR     | TOTAL<br>ADD'L<br>FEE | 260   |   |  |       |  |       |  |  |            |  |  |            |            |                            |  |           |   |   |                  |           |                        |           |                        |   |       |    |   |                        |                        |                              |   |       |     |   |           |           |  |  |  |        |  |    |        |  |  |  |  |  |  |  |        |  |    |        |  |  |  |  |  |  |  |                       |    |                       |     |  |  |  |  |
| (Column 1)   |   |   | (Column 2)                 | (Column 3)  | OTHER THAN<br>SMALL ENTITY       |                                       |                               |                        |           |                            |            |                            |  |            |   |   |                  |              |                        |              |                        |                        |              |           |          |                        |                        |   |           |                        |     |                              |           |           |  |  |        |        |    |          |        |   |  |     |        |  |  |           |                                  |            |    |        |  |  |  |  |           |                       |        |                       |        |                       |   |   |  |       |  |       |  |  |            |  |  |            |            |                            |  |           |   |   |                  |           |                        |           |                        |   |       |    |   |                        |                        |                              |   |       |     |   |           |           |  |  |  |        |  |    |        |  |  |  |  |  |  |  |        |  |    |        |  |  |  |  |  |  |  |                       |    |                       |     |  |  |  |  |
| AMENDMENT  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA           | RATE (\$)   | ADDITIONAL<br>FEE (\$)           | RATE (\$)                             |                               |                        |           |                            |            |                            |  |            |   |   |                  |              |                        |              |                        |                        |              |           |          |                        |                        |   |           |                        |     |                              |           |           |  |  |        |        |    |          |        |   |  |     |        |  |  |           |                                  |            |    |        |  |  |  |  |           |                       |        |                       |        |                       |   |   |  |       |  |       |  |  |            |  |  |            |            |                            |  |           |   |   |                  |           |                        |           |                        |   |       |    |   |                        |                        |                              |   |       |     |   |           |           |  |  |  |        |  |    |        |  |  |  |  |  |  |  |        |  |    |        |  |  |  |  |  |  |  |                       |    |                       |     |  |  |  |  |
|  | Total (37 CFR 1.16(i))  | *   | Minus                      | **  | =                                | ADDITIONAL<br>FEE (\$)                | ADDITIONAL<br>FEE (\$)        |                        |           |                            |            |                            |  |            |   |   |                  |              |                        |              |                        |                        |              |           |          |                        |                        |   |           |                        |     |                              |           |           |  |  |        |        |    |          |        |   |  |     |        |  |  |           |                                  |            |    |        |  |  |  |  |           |                       |        |                       |        |                       |   |   |  |       |  |       |  |  |            |  |  |            |            |                            |  |           |   |   |                  |           |                        |           |                        |   |       |    |   |                        |                        |                              |   |       |     |   |           |           |  |  |  |        |  |    |        |  |  |  |  |  |  |  |        |  |    |        |  |  |  |  |  |  |  |                       |    |                       |     |  |  |  |  |
| Independent (37 CFR 1.16(h))   | *   | Minus                                       | ***                        | =   | RATE (\$)                        | RATE (\$)                             |                               |                        |           |                            |            |                            |  |            |   |   |                  |              |                        |              |                        |                        |              |           |          |                        |                        |   |           |                        |     |                              |           |           |  |  |        |        |    |          |        |   |  |     |        |  |  |           |                                  |            |    |        |  |  |  |  |           |                       |        |                       |        |                       |   |   |  |       |  |       |  |  |            |  |  |            |            |                            |  |           |   |   |                  |           |                        |           |                        |   |       |    |   |                        |                        |                              |   |       |     |   |           |           |  |  |  |        |  |    |        |  |  |  |  |  |  |  |        |  |    |        |  |  |  |  |  |  |  |                       |    |                       |     |  |  |  |  |
|  | <input type="checkbox"/> Application Size Fee (37 CFR 1.16(s))  |   | X \$ =                     |   | OR                               | X \$ =                                |                               |                        |           |                            |            |                            |  |            |   |   |                  |              |                        |              |                        |                        |              |           |          |                        |                        |   |           |                        |     |                              |           |           |  |  |        |        |    |          |        |   |  |     |        |  |  |           |                                  |            |    |        |  |  |  |  |           |                       |        |                       |        |                       |   |   |  |       |  |       |  |  |            |  |  |            |            |                            |  |           |   |   |                  |           |                        |           |                        |   |       |    |   |                        |                        |                              |   |       |     |   |           |           |  |  |  |        |  |    |        |  |  |  |  |  |  |  |        |  |    |        |  |  |  |  |  |  |  |                       |    |                       |     |  |  |  |  |
|  | <input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))  |   | X \$ =                     |   | OR                               | X \$ =                                |                               |                        |           |                            |            |                            |  |            |   |   |                  |              |                        |              |                        |                        |              |           |          |                        |                        |   |           |                        |     |                              |           |           |  |  |        |        |    |          |        |   |  |     |        |  |  |           |                                  |            |    |        |  |  |  |  |           |                       |        |                       |        |                       |   |   |  |       |  |       |  |  |            |  |  |            |            |                            |  |           |   |   |                  |           |                        |           |                        |   |       |    |   |                        |                        |                              |   |       |     |   |           |           |  |  |  |        |  |    |        |  |  |  |  |  |  |  |        |  |    |        |  |  |  |  |  |  |  |                       |    |                       |     |  |  |  |  |
|  |   |   | TOTAL<br>ADD'L<br>FEE      | OR  | TOTAL<br>ADD'L<br>FEE            | 260                                   |                               |                        |           |                            |            |                            |  |            |   |   |                  |              |                        |              |                        |                        |              |           |          |                        |                        |   |           |                        |     |                              |           |           |  |  |        |        |    |          |        |   |  |     |        |  |  |           |                                  |            |    |        |  |  |  |  |           |                       |        |                       |        |                       |   |   |  |       |  |       |  |  |            |  |  |            |            |                            |  |           |   |   |                  |           |                        |           |                        |   |       |    |   |                        |                        |                              |   |       |     |   |           |           |  |  |  |        |  |    |        |  |  |  |  |  |  |  |        |  |    |        |  |  |  |  |  |  |  |                       |    |                       |     |  |  |  |  |

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**  
*If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.*

Legal Instrument Examiner:  
**/AJAY R. DAVID/**